Supplemental Table 1. PRISMA 2009 Guidelines

Section/topic	Checklist item	Reported on page #	
	Title		
Title	Identify the report as a systematic review, meta-analysis, or both.	Page 1	
	Abstract		
Structured summary	Provide a structured summary including, as applicable: background; objectives;	Page 2	
	data sources; study eligibility criteria, participants, and interventions; study		
	appraisal and synthesis methods; results; limitations; conclusions and implications		
	of key findings; systematic review registration number.		
	Introduction		
Rationale	Describe the rationale for the review in the context of what is already known.	Pages 4 & 6	
Objectives	Provide an explicit statement of questions being addressed with reference to	Pages 7-8	
	participants, interventions, comparisons,		
	outcomes, and study design (PICOS).		
	Methods		
Protocol and registration	Indicate if a review protocol exists, if and where it can be accessed (e.g., Web	Pre-registration was not	
	address), and, if available, provide	obtained.	
	registration information including registration number.		
Eligibility criteria	Specify study characteristics (e.g., PICOS, length of follow-up) and report	Pages 9-11	
	characteristics (e.g., years considered,		
	language, publication status) used as criteria for eligibility, giving rationale.		
Information sources	Describe all information sources (e.g., databases with dates of coverage, contact	Page 9	
	with study authors to identify		
	additional studies) in the search and date last searched.		
Search	Present full electronic search strategy for at least one database, including any limits	Supplemental Table 2	
	used, such that it could be		
	repeated.		
Study selection	State the process for selecting studies (i.e., screening, eligibility, included in	Pages 10-11	
	systematic review, and, if applicable,		
	included in the meta-analysis).		
Data collection process	Describe method of data extraction from reports (e.g., piloted forms,	Page 12	
	independently, in duplicate) and any processes		
	for obtaining and confirming data from investigators.		
Data items	List and define all variables for which data were sought (e.g., PICOS, funding		
	sources) and any assumptions and	Table 3	
	simplifications made.		

KUMMING HEAD. THEKAPIST I	EXPERIENCE AND INTERNALIZING OUTCOMES	
Risk of bias in individual studies	Describe methods used for assessing risk of bias of individual studies (including specification of whether this was	Page 12, 24
	done at the study or outcome level), and how this information is to be used in any	
	data synthesis.	
Summary measures	State the principal summary measures (e.g., risk ratio, difference in means).	Page 12
Synthesis of results	Describe the methods of handling data and combining results of studies, if done,	Pages 13-14
•	including measures of consistency	
	(e.g., I2) for each meta-analysis.	
Risk of bias across studies	Specify any assessment of risk of bias that may affect the cumulative evidence	Page 13
	(e.g., publication bias, selective	
	reporting within studies).	
Additional analyses	Describe methods of additional analyses (e.g., sensitivity or subgroup analyses,	Page 13
	meta-regression), if done, indicating	
	which were pre-specified.	
	Results	
Study selection	Give numbers of studies screened, assessed for eligibility, and included in the	Pages 10-11, Figure 1
	review, with reasons for exclusions at	
	each stage, ideally with a flow diagram.	
Study characteristics	For each study, present characteristics for which data were extracted (e.g., study	Supplemental Table 4
	size, PICOS, follow-up period) and	
	provide the citations.	
Risk of bias within studies	Present data on risk of bias of each study and, if available, any outcome level assessment (see item 12).	Supplemental Table 4
Results of individual studies	For all outcomes considered (benefits or harms), present, for each study: (a) simple	Figure 2
Results of marvidual studies	summary data for each	riguic 2
	intervention group (b) effect estimates and confidence intervals, ideally with a	
	forest plot.	
Synthesis of results	Present results of each meta-analysis done, including confidence intervals and	Page 15, Pages 18-19,
2 5	measures of consistency.	Table 1
Risk of bias across studies	Present results of any assessment of risk of bias across studies (see Item 15).	Page 15, Pages 18-19
Additional analysis	Give results of additional analyses, if done (e.g., sensitivity or subgroup analyses,	<u> </u>
•	meta-regression [see Item 16]).	_
	Discussion	
Summary of evidence	Summarize the main findings including the strength of evidence for each main	Pages 19-22
	outcome; consider their relevance to	
	key groups (e.g., healthcare providers, users, and policy makers).	

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Limitations	Discuss limitations at study and outcome level (e.g., risk of bias), and at review-	Pages 22-24					
	level (e.g., incomplete retrieval of						
	identified research, reporting bias).						
Conclusions	Provide a general interpretation of the results in the context of other evidence, and	Pages 25-26					
	implications for future research.						
	Funding						
Funding	Describe sources of funding for the systematic review and other support (e.g.,	No funding to report					
	supply of data); role of funders for the						
	systematic review.						

### Supplemental Table 2. List of search terms

#### Search terms used

- "Therapist OR provider OR clinician OR counselor OR psychologist OR mental health professional OR psychiatrist"
- "paraprofessional OR layperson"
- "experience OR training"
- "client OR patient OR participant" "symptom OR outcome"
- "internalizing OR depression OR anxiety"
- "withdrawal OR worry OR sadness OR irritability OR nervousness OR fear OR neuroticism"
- Wildcard terms were used to allow for results to include all possible versions of a word (e.g., using depress\* to include "depression," "depressive," and "depressed")
- In addition, "NOT" statements were used to exclude inappropriate articles (e.g., "NOT speech therapist" when searching for "therapist")
- Disorder terms, including:
  - o "Specific Phobia"
  - o "Social Phobia"
  - "Social Anxiety Disorder"
  - o "Generalized Anxiety Disorder"
  - o "Panic Disorder"
  - o "Posttraumatic Stress Disorder"
  - o "Obsessive-Compulsive Disorder"
  - o "Separation Anxiety Disorder"
  - o "Depression"
  - o "Major Depressive Disorder"
  - o "Dysthymia"
  - o "Persistent Depressive Disorder"

Note. Searches completed in June-August 2016 and December 2017-January 2018.

## RUNNING HEAD: THERAPIST EXPERIENCE AND INTERNALIZING OUTCOMES

Supplemental Table 3. Moderator codes, categories, and definitions

<b>Moderator Code</b>	Category	Definition
Treatment approach	Cognitive Behavioral Therapy	Study therapists delivered CT, BT, CBT, or any brand-name CT/BT/CBT treatments (e.g., Coping Cat, ERP), or are described as using techniques considered consistent with this treatment modality (e.g., behavioral activation, exposures, cognitive restructuring).
	Non-CBT Treatment	Study therapists delivered any non-CBT treatment, including psychodynamic, analytical, experiential, IPT, client-centered, nondirective, humanistic, family, eclectic, or other therapies.
Client age	All adults	All clients were adults/young adults/college students, or all clients were > 18 years of age.
	All youth	All clients were youth/children/adolescents, or all clients were <18 years of age.
Client diagnostic category	Primary anxiety disorder	Client sample is diagnosed with, or has problems/symptoms consistent with any of the following anxiety diagnoses: OC Spectrum Disorders, Posttraumatic Stress Disorder, Generalized Anxiety Disorder, Separation Anxiety Disorder, Selective Mutism, Social Phobia, Panic Disorder, Specific Phobias (e.g., snakes, heights), and/or Adjustment Disorder (i.e., with anxiety).
	Primary depressive disorder	Client sample is diagnosed with, or has problem/symptoms consistent with any of the following depressive diagnoses: Depressive disorders (e.g., Persistent Depressive Disorder, Major Depressive Disorder), and/or Adjustment Disorder (i.e., with depressed mood).
	Mixed internalizing disorder	Client sample is diagnosed with, or has problem/symptoms consistent with a variety of the internalizing disorders AND there is not information given on results that separate anxious and depressed client outcomes.
Comorbidity	Comorbidity allowed	Client sample is described as having any comorbid disorders. Any type of comorbid psychological disorders are acceptable to count towards this code, including comorbid anxiety disorders and depressive disorders.

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	Comorbidity not allowed/Unknown	Clients with comorbidities were not allowed into the study and/or no information was given regarding any secondary/comorbid diagnoses study clients are diagnosed with.
Supervision	Equal supervision	All therapists received equivalent supervision, regardless of experience level.
	Less experienced therapists received more supervision	Therapists with less experience (e.g., students) received more supervision that more experienced therapists.
Randomization	Randomized clients to therapists	Clients were randomly assigned to therapists. Randomization can be strictly done (i.e., similar to that done in RCTs), or more casually (e.g., therapist gets whatever client is next on the waitlist).
	No randomization/Unknown	Clients were not randomized to therapists (e.g., more experienced clinicians will get more severely impaired clients). If study did analyses and found the groups to be equivalent in pre-treatment symptoms, was considered to be appropriate for this code. Also included studies with no information regarding client randomization.
Treatment manualization	Treatment manualized	Treatment was based off an established treatment program, often needing some formal training/practice and therapy protocol, manual, or book to guide the therapists. Formalized fidelity checks were not necessary to receive this code.
	Treatment not manualized/Unknown	This code could represent several things, including: therapists who could deliver any treatment; therapists delivering a treatment but with no subscribed session length, session content, or order; studies including two different types of treatment, one manualized and one not; and studies with no information about treatment beyond a general theoretical orientation.
Definition of therapist experience	Professionals versus paraprofessionals (Broad Definition)	Included studies comparing "professionals," generally master's level clinicians or higher, with "paraprofessionals," most commonly college students or lay persons with no experience delivering therapy.
	General clinical experience (Broad Definition)	Included studies measuring experience as days, months, or years conducting therapy, without information about work with a specific client population or treatment manual.

Degree/schooling level (Broad Definition)	Included studies comparing therapists at different degree levels (at least 3), most commonly undergraduate, master's-, and doctoral-level clinicians.
Experience with specific client population (Specific Definition)	Included studies measuring experience with a client population (e.g., anxiety disorders, OCD). Experience could be measured either in number of clients served, or in length of time working with the population (e.g., months in a specialized practicum).
Experience with specific treatment (Specific Definition)	Included studies measuring experience with a treatment (e.g., Coping Cat, ERP). Experience could be measured either in number of times treatment used, or in length of time using the treatment (e.g., months in a specialized practicum).
Professionals versus trainees (Broad Definition)	Included studies comparing "professionals," generally master's level clinicians or higher, with "trainees," most commonly predoctoral psychology trainees.

Note. CT=Cognitive Therapy, BT=Behavioral Therapy, CBT= Cognitive Behavioral Therapy, ERP=Exposure and Response Prevention, IPT=Interpersonal Therapy.

## RUNNING HEAD: THERAPIST EXPERIENCE AND INTERNALIZING OUTCOMES

Supplemental Table 4. Included studies, therapist experience definition, sample size, and moderator category

Authors	Year	Subgroup used in analyses	Experience definition category	# Clients (# Therapists)	Age group	Disorder group	Treatment Approach	Comorbidity allowed	Therapist supervision	Randomization	Treatment Manualzation	Outcome Domain	Outcome Rater
Andersson, Calbring, Furmark, & SOFIE Research Group	2012	Licensed psychologists versus advanced student trainees	Professional versus Trainee (Broad)	102(13)	Adult	Anxiety	СВТ	No/Unknown	Unequal	Yes	Yes	•Anxiety •Depression •Functioning	•Client
Baker & Neimeyer <sup>i</sup>	2003	Professionals (Master's level or higher) versus paraprofessionals	Professional versus Paraprofessional (Broad)	98 (14)¥	Adult	Depression	Other (Combination of CBT and Supportive)	Yes	Equal	No	No/Unknown	•Depression	•Client •IE
Bright, Baker, & Neimeyer (CBT arm) <sup>1</sup>	1999	Professionals (Master's level or higher) versus paraprofessionals	Professional vs Paraprofessional (Broad)	31(14)*	Adult	Depression	СВТ	Yes	Equal	No	Yes	•Depression •Functioning •Other	•Client •IE
Bright, Baker, & Neimeyer (MSG arm) <sup>1</sup>	1999	Professionals (Master's level or higher) versus paraprofessionals	Professional vs Paraprofessional (Broad)	36(14) <sup>¥</sup>	Adult	Depression	Other (Supportive)	Yes	Equal	No	No/Unknown	•Depression •Functioning •Other	•Client •IE
Bisbey (TIR arm)	1995	Therapists with more or less experience with TIR	Experience with specific treatment (Specific)	19(4) <sup>¥</sup>	Adult	Anxiety	СВТ	No/Unknown	Equal	Unknown	Yes	•Anxiety	•Client
Bisbey (DTE arm)	1995	Therapists with more or less experience with TIR	Experience with specific treatment (Specific)	19(4)¥	Adult	Anxiety	СВТ	No/Unknown	Equal	Unknown	Yes	•Anxiety	•Client
Franklin, Abramowitz, Furr, Kalsy, & Riggs	2003	High experience versus Medium experience High experience versus Low experience Medium experience versus Low experience	Experience with specific treatment (Specific)	86(30)	Adult	Anxiety	СВТ	Yes	Unequal	No	Yes	•Anxiety •Depression	•IE
Howard	1999	Specialist versus nonspecialists	Experience with specific treatment (Specific)	165(47)	Adult	Anxiety	СВТ	No/Unknown	Unknown	No	No/Unknown	•Anxiety •Depression •Functioning •Other •Combination of internalizing/externalizing	●IE •Other
Huppert, Bufka, Barlow, Gorman,	2001	Years conducting CBT	Experience with specific treatment (Specific)	183(14)	Adult	Anxiety	СВТ	No/Unknown	Equal	No	Yes	•Anxiety •Depression	•Client
Shear, & Woods	2001	Years conducting general psychotherapy	General clinical experience (Broad)	103(17)	. Iduit	1 matery	CD1	110, Challowii	Equu	110	103	<ul> <li>Internalizing</li> </ul>	∙IE

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Konuk, Knipe, Eke, Yuksek, Yurtsever, & Ostep	2006	Years conducting clinical work	General clinical experience -split into less versus more experienced groups (Broad)	41(5)	Adult	Anxiety	CBT (EMDR)	No/Unknown	Equal	No	Yes	•Anxiety	•Client
Lewis	2011	Months conducting therapy	General clinical experience (Broad)	222(33)	Adult	Internalizing Disorders	СВТ	Yes	Unequal	No	No/Unknown	•Anxiety •Depression	•Client
McLean & Hakstian	1979	Years conducting general psychotherapy	General clinical experience (Broad)	129(4)	Adult	Depression	Other (Multiple treatment modalities)	No/Unknown	Equal	Yes	No/Unknown	•Internalizing	•Client
Nyman, Nafziger, & Smith	2010	Professional versus Pre- doctoral intern Professional versus Practicum student Pre-doctoral intern versus Practicum student	Degree/Schooling levels (Broad)	264(32)	Adult	Internalizing Disorders	Other (Multiple treatment modalities)	No/Unknown	Unequal	Unknown	No/Unknown	•Anxiety •Depression •Internalizing •Functioning	•Client
Piacentini. Bergman, Jacobs, McCracken, & Kretchman	2002	Experienced CBT therapists versus trainees	Experience with specific treatment (Specific)	42(Unknown)	Youth	Anxiety	СВТ	No/Unknown	Unequal	Unknown	Yes	•Anxiety •Functioning	∙IE
Podell	2010	Number of anxious clients seen Years conducting therapy	Experience with client population (Specific) General clinical experience (Broad)	279(38)	Youth	Anxiety	СВТ	Yes	Equal	Yes	Yes	•Anxiety •Functioning	•Client •IE •Parent
Propst, Paris, & Rosberger	1994	Psychiatrist versus Psychiatry Resident Psychiatrist versus Family Medicine Resident Psychiatrist versus Medical Student Psychiatry Resident versus Family Medicine Resident Psychiatry Resident versus Medical Student Family Medicine Resident versus Medical Student Family Medicine Resident versus Medical Student	Degree/Schooling levels (Broad)	42(Unknown)	Adult	Internalizing Disorders	Psychodynamic	Yes	Unequal	Yes	No/Unknown	•Functioning •Satisfaction •Other •Combination of internalizing/externalizing	•Client •IE
Russell & Wise (Systematic Desensitization arm)	1976	Experienced versus paraprofessionals	Professional versus paraprofessional (Broad)	35(6) <sup>¥</sup>	Adult	Anxiety	СВТ	No/Unknown	Equal	No	Yes	•Anxiety	•Client

Russell & Wise (Cue-Controlled Relaxation arm)	1976	Experienced versus paraprofessionals	Professional versus paraprofessional (Broad)	35(6) ¥	Adult	Anxiety	СВТ	No/Unknown	Equal	No	Yes	◆Anxiety	•Client
Stanley et al.; Kraus-Schuman et al.; Freshour et al.€	2014, 2015, 2016	Professionals (PhD level) versus paraprofessionals	Professional versus paraprofessional (Broad)	150(10)	Adult	Anxiety	СВТ	Yes	Equal	Yes	Yes	•Depression •Anxiety •Functioning •Satisfaction •Other	•Client •IE •Other
Thirlwall, Cooper, Karalus, Voysey, Willetts, & Creswell (Brief CBT arm)	2013	Some clinical experience versus Novices	Professional versus paraprofessional (Broad)	61(19) <sup>¥</sup>	Youth	Anxiety	CBT (Brief)	Yes	Equal	No	Yes	•Anxiety	∙IE
Thirlwall, Cooper, Karalus, Voysey, Willetts, & Creswell (Full CBT arm)	2013	Some clinical experience versus Novices	Professional versus paraprofessional (Broad)	64(19)¥	Youth	Anxiety	CBT (Full)	Yes	Equal	No	Yes	•Anxiety	∙IE
Thompson, Gallagher, Nies, & Epstein	1983	Professional versus paraprofessional	Professional versus paraprofessional (Broad)	56(16)	Adult	Depression	СВТ	No/Unknown	Unknown	Unknown	Yes	•Depression •Functioning •Satisfaction •Other	●IE ●Other
van Oppen, van Balkom, Smit, Schurmans, van Dyck, & Emmelkamp	2010	Professional versus Master's clinical psychology trainees	Professional versus trainees (Broad)	118(19)	Adult	Anxiety	СВТ	Yes	Equal	Yes	Yes	•Anxiety •Depression • Other	• Client • IE • Other
Vosciano et al.	2004	Years conducting therapy	General clinical experience (Broad)	173(48)	Adult	Depression	CBT (CBASP)	No/Unknown	Unequal	Yes	Yes	•Depression	∙IE

Note. CBT=cognitive behavioral therapy, MSG=Mutual support group, TIR=Traumatic Incident Reduction, DTE=Direct Therapeutic Exposure, EMDR=Eye Movement Desensitization and Reprocessing, CBASP=Cognitive Behavioral Analysis System of Psychotherapy.

<sup>&</sup>lt;sup>1</sup>Data in both studies are from the same randomized control trial.

<sup>&</sup>lt;sup>4</sup>Same group of therapists delivered both arms of treatment. Number of therapists counted once towards total sample size.

<sup>&</sup>lt;sup>6</sup>All articles reported on data from the same sample.